

SUPPLEMENTAL INSTRUCTIONS FOR SF-424 FINANCIAL ASSISTANCE APPLICATION

Prepared by NOAA GMD, adapted by NMFS F/PR2

SF424, APPLICATION FOR FEDERAL ASSISTANCE

(Revised Form dated 7-97.)

Block 1. TYPE OF SUBMISSION:

Check the Non-Construction or Construction block in the "**Application**" section. This is the formal document submitted by the applicant upon which an award will be made. This program does not accept preapplications.

Block 2. DATE SUBMITTED:

The date submitted to the Federal agency is very important and if not completed will delay processing of the application.

Block 3. DATE RECEIVED BY STATE:

For state applicants in states that require submission to a State Single Point of Contact (SPOC), indicate here the date that the application was received by the state. You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance, or from the Prescott Grant Program homepage, at:

http://www.nmfs.noaa.gov/prot_res/PR2/Health_and_Stranding_Response_Program/Prescott.html

Contact your state's SPOC to determine whether or not your state requires review and clearance of the Prescott Stranding Grant application. If SPOC clearance is required, you are responsible for getting that clearance in time to submit your application to the Prescott Stranding Grant Program by the published deadline.

State Application Identifier (SAI): (If applicable, i.e. if you check yes in Block 16.)

Block 4. DATE RECEIVED BY FEDERAL AGENCY:

Date will be entered by Federal Agency upon receipt.

FEDERAL IDENTIFIER: All applications to the Prescott Grant Program are "New" (see Block 8) and therefore this block does not have to be completed.

Block 5. APPLICANT INFORMATION: "Legal Name" must match the name of the eligible applicant (i.e., LOA holder, LOA designee, authorized researcher, Northwest Contingency Plan participant, or state, local, or federal official/employee).

Block 6. EMPLOYER IDENTIFICATION NUMBER:

Number assigned by Internal Revenue Service as your or your organization's tax Identification number. Obtain from your employer/business office. **Must be included.**

Block 7. TYPE OF APPLICANT:

NOTE: For purposes of this application, State universities are considered Institutions of Higher Learning (I) - not state. Covered under OMB Circular A-110.

Block 8. TYPE OF APPLICATION:

Either “New” or “Continuation” should be checked.

Check “New” if a Prescott grant has not previously been received by the applicant named in Block 5 or if a Prescott grant was received previously but the application represents an entirely new proposal (i.e., different scope of work) for the 2003/2004 cycle.

Check “Continuation” if a Prescott grant was received previously by the applicant named in Block 5 and this application represents a continuation (i.e., same scope of work) in 2003/2004 of the work funded by that grant.

Block 9. NAME OF FEDERAL AGENCY:

Insert: **NOAA**

Block 10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER (CFDA):

a. Number: **11.439**

b. Title: **Marine Mammal Data Program**

NOTE: CFDA-Catalog of Federal Domestic Assistance. All universities and states have them. Can be obtained from [Http://aspe.os.dhhs.gov/cfda/intro.htm](http://aspe.os.dhhs.gov/cfda/intro.htm) or from the Superintendent of Documents, Government Printing Office, Washington, DC 20402 and public libraries.

Block 11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

Use key words. Provide concise description. Follow instructions on the SF-424.

Block 12. AREAS AFFECTED BY PROJECT: Self Explanatory

Block 13. PROPOSED PROJECT START AND ENDING DATES:

Indicate the total period of performance for the project.

Start Date: No earlier than three months before the anticipated date of obligation of the funds. Since the 2003/2004 cycle will use funds from two fiscal years, we recommend for item 13 of Standard Form 424 a start date no earlier than October 2003 for 2003 project proposals and January 2004 for 2004 project proposals.

Block 14. CONGRESSIONAL DISTRICTS OF:

a. Applicant: District that matches the applicant's address. Only one Congressional district should be selected.

b. Project: District(s) that match states, counties, cities listed in Block 12-“Areas Affected by the Project”. More than one Congressional district can be selected.

Block 15. ESTIMATED FUNDING:

- a. Federal: Funds requested for this budget period of the project (12-36 months).
 - b. Applicant: All funding provided by the applicant (non-Federal share) for this budget period, regardless of type.
 - c. State: If applicant is not a State entity (as indicated in Block 7, Type A, E, or I), use for in-kind contributions (third party non-monetary donations or loans used for the project), cost sharing, or match from states. If applicant is a State entity, use line "b. Applicant" to provide this information.
 - d. Local: If applicant is not a Local government entity (as indicated in Block 7, Type B, C, D, F, G, H), use for in-kind contributions (third party non-monetary donations or loans used for the project), cost sharing, or match from local government. If applicant is a Local government entity, use line "b. Applicant" to provide this information.
 - e. Other: Use for in-kind contributions, cost sharing, or match from "other sources" not identified in "a through d".
 - f. Program Income: Use to show estimated income to be derived from this project, e.g., registration fees, admission fees, etc. Program Income to be used as designated in the NOAA Administrative Special Award Condition.
- NOTE: Funds shown in (b.-e.) will be included in the award as contributions/cost sharing/match and cannot be withdrawn or adjusted after awarded.
- g. TOTAL: Add lines a-f.

Block 16. IS APPLICANT SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? For State applicants only.

Either "a. YES" or "b. NO" must be checked by all State applicants. Contact your state's single point of contact (SPOC) to determine whether or not your state requires review and clearance of the Prescott Grant proposal. If SPOC clearance is required, you are responsible for getting that clearance in time to submit your application to the Prescott Grant Program by the annual solicitation deadline.

You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance, or from the Prescott Grant Program homepage, at:

http://www.nmfs.noaa.gov/prot_res/PR2/Health_and_Stranding_Response_Program/Prescott.html

If YES is selected and the date and the SAI are not provided in Block 3 of this form, they must be furnished immediately upon receipt from the SPOC to the Federal Program Officer.

Block 17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

Either a. or b. must be completed.

We will not award any Federal funds to you or any subrecipients who have an outstanding delinquent Federal debt or fine until either:

- a. The delinquent account is paid in full,
- b. A negotiated repayment schedule is established and at least one payment is received, or
- c. Other arrangements satisfactory to the Department of Commerce are made.

NOTE: If "No" is checked but a review by the NOAA Grants Management Division reveals that the applicant organization (for universities, any campus, for States, any bureau or agency) is delinquent on any payment, i.e., taxes, invoices, etc., the award will not be made until the delinquency has been resolved.

Block 18. SIGNATURES:

Must be signed by legal applicant named in Block 5. (Authorizing signature of Organization performing work or responsible for performance of work.) Blocks 18 a.-e. must be completed. If approved, the award will be addressed to this person.

NOTE: The Prescott Grant Program limits the awarding of funds to no more than two awards per LOA holder or designee, and no more than one award per eligible researcher. Therefore, to avoid confusion when applying as an independent researcher, make sure the Authorized Representative is not the same as the Authorized Representative for an LOA holder or designee also seeking funding under Prescott.